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**UNITED STATES DISTRICT COURT  
DISTRICT OF NEVADA**  
**-oOo-**

UNITED STATES OF AMERICA,	)	2:10-cr-287-GMN-VCF
	)	
Plaintiff,	)	<b><u>ORDER</u></b>
	)	
VS.	)	
	)	
	)	
LANCE KELLOW,	)	
	)	
Defendant.	)	
_____	)	

At the request of Counsel for the Government and notice provided in open Court to the defendant, IT IS HEREBY ORDERED THAT counsel for both parties may review the jury selection surveys returned by potential jurors in this case in advance of the first day of trial.

**IT IS FURTHER ORDERED** that the parties shall review, sign and comply with the attached Certificate of Compliance with Juror Card Procedure.

**IT IS SO ORDERED** this 7th day of February, 2013.

  
\_\_\_\_\_  
Gloria M. Navarro  
United States District Judge

# United States District Court

DISTRICT OF NEVADA

## CERTIFICATE OF COMPLIANCE WITH JUROR CARD PROCEDURE

I \_\_\_\_\_ of the firm of \_\_\_\_\_ certify that I will not use the information provided in any manner or purpose other than that of trial preparation in this particular case. Furthermore, I certify that I will not contact, directly or indirectly, any of the individuals, employers or any other person(s), including but not limited to spouses, children, neighbors, etc., whose existence may be revealed by the data provided in the Jury Information Form without further leave of Court. Finally, I understand and agree that I shall be responsible for keeping and maintaining all information confidential and that **the following information shall not be abstracted or copied** from the card:

- juror's social security number
- juror's date of birth
- any addresses
- any phone numbers

I request that \_\_\_\_\_ who are employee(s) of the above named law firm, be allowed to abstract the juror information and to be governed by the same restrictions noted above.

The undersigned hereby certify they understand and agree that any violation of this certification shall result in a Contempt of Court proceeding requiring their attendance.

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of attorney)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of employee)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of employee)

**PLEASE NOTE:** You must call the Jury Office, 464-5600, Monday through Friday 9:00 am to 4:00 pm to make an appointment to view the juror cards.

For Official Use Only: Trial Date \_\_\_\_\_ Pool \_\_\_\_\_